Occupational Safety and Hei Administration

Notice of Alleged Safety or Health Hazards Thu Apr 17, 2003 9:37am

Establishment Name	Federal Correctional Institute, McKean				
Site Address	Rt. 59 and Big Shanty Rd., Lewis Run, PA 16738				
	Site Phone (814) 362-8900	Site FAX	(814) 363-6811		
Mailing Address	P.O. Box 5000, Bradford, PA 16701				
	Mail Phone (814) 632-8900	Mail FAX	(814) 363-6811		
Management Official	Stephen Housler, Safety	Telephone	(,		
Type of Business	Federal Corrections	Ownership	*		
Primary SIC	9223	Primary NAICS	922140		

- 1. Ventilation is inadequate to control the hazards associated dusts generated during the production processes. These dusts include but are not limited to wood dust, particle board dust, and micore board dust.
- 2. Ventilation is inadequate to control the hazards associated with vapors that are produced by the glues utilized in the laminating processes.
- 3. Dust is accumulating on surfaces throughout the factory area. This dust includes but is not limited to wood dust, particle board dust, and micore board dust.
- 4. Personnel are smoking in close proximity to operations that produce wood dust and utilize flammable glues.
- 5. Compressed air above 30 psi is being utilized for blow-downs and cleaning operations.
- 6. Plexi-glass and plywood are being stored on top of electrical boxes. Electrical boxes are located in the back by the dock area.
- 7. Personnel are potentially exposed to a fire hazard from a heavy accumulation of scrap wood at the loading dock area.

LOCATION:

UNICOR Factory (Including but not Limited To):

- * Loading Dock Area
- * Saw Area
- * Laminating Area, Front Area by Office

Page 2 of 3 Thu Apr 17, 2003 9:37am Complaint Nr. 200381895

Has this conc	lition been broug	ht to the attentio	n of: Emplo	yer				
	te Your Desire:		Do NO	T reveal	my name to t	he Employer		
Occupational	med believes that Safety or Health y or health hazard s form.	standard exists v	B. Rep	resentati	ve of Employe	e		
Complainant	Name	Richard D. Yo	vichin II			Telep	hone	(814)
Address(Stree	rt,City,State,Zip)	662 South Ave Bradford PA				ł ",		368-3526
Signature				-		Date		
	authorized repres		oyees affected l	y this co	mplaint, please	state the nar	ne of the	organization
Organization 1	Name: AFGE Lo	cal 3974				Your Ti	le: Presi	dont
(8) (8) (8) (7) (8) (8)						TOUL III	ic. Fresi	uent
Identification	Reporting ID	0336000	Previous Acti		0	Opt. Number		
	Establishment N ☐ Yes ☐ No	Name Change?	Site Address (☐Yes ☐No	Change?	Employer ID			ode County Code
Receipt Information	Received By		Send OSHA-7 ☐ Yes ☐ N		Date: 04/14/0 Time:	3 5	4420 ipervisor	_ 083 (s) Assigned
		•		•	i inio,	AM WO	556	
Industry & Ownership		ncy: 1503 - BUR	EAU OF PRIS	ONS		PM		-
Complaint Evaluation	Evaluated By Subject/Severity					· · · · · · · · · · · · · · · · · · ·		,
	Is this a Valid Complaint? Yes Formality Formal			- Safety-Serious				
	Migrant Farmwo		Health-Serious					
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Letter	Туре				Date Lette Received	r Evaluation		Abatement Date
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Close Complaint								

COMMENTS T

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U. S. Department of Labor Occupational Safety and Health Administration

Notice of Alleged Safety or Health Hazards

	Complant Number
Establishment Name	NOT DOP FCT MCKEAN
Site Address	4.0. Box 5000 Bradford 4A 16701
	(814) 362-8900 Dec 8 914 363-6811
Mailing Address	5ANF 363 6811
	Wai Plane Mai EAX
Management Official	Debic Forsyth telephone (814) 362-8900
Type of Business	UNICOR Furniture Factory
HAZARD DESCRIPTIONAL exposed to or threatened by each hazard	QCATION Describe bridge the records which you believe seek include the approximate number of employees Speaks the particular the belief or works its winner the alleged violation of sizes.
and No resp Dise of the 5 The Dust is and inmutes and Complains Trimates are	processing Micore Board with a power Saw brators are being Fornish to Staff or inmates house has a shop une on it for Dust Collection currendating all over the fuctory and staff are recieving irretations to eyes and standing of being congested. also smoking in the vacinity: Ap occurs Air Loses are used to push Away.
THE WESTS	7884
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Has this countries there brough	© the Government Agency(specify)
Please Incheate Your Desire:	☐ Do NOT reveal my name to my Employer ☐ My name may be revealed to the Employer
The Undersigned believes that a an Occupational Safety or Health exists which is a job safety or im at the establishment named on the	atti herard. Employee Federal Safety and Health Committee
Complainer Name	Pichano D Vovichina Telephone 817368-3506
Address(Street City State Zip)	662 South AVE BIOGOOD PA 16701-3976
Signature	TODO 4/10/03
If you are an authorized represent processor and your title:	tative of employees afficied by this complaint; please state the name of the organization that you
Organization Name: Your Ti	tle: